1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 716027

1. Corporation Name

ROLLING GREEN CONDOMINIUM D. INC.

FILED Mar 10, 1999 8:00 am § Secretary of State

03-10-1999 90015 024 ****61.25

Principal Place of Business Mailing Address							• •	•
1401 NE. 191 ST. NMIAMI BEACH FL 33179 1401 NE. 191 ST. N. MIAMI BEACH FL 33179								
2. Principal Pl	ace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed 02/11/1969		
21		26				4. FEI Number		lind For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				59-1274688		
(2)		City & State				33 121 4000	\$8.75 Ac	
City & State	Ð	28				5. Certificate of Status Desired	Fee Req	
Žip	Country	Zip 29 34	Cou	ntry		6. Election Campaign Financing Trust Fund Contribution	\$5.00 N Added to	, ,
24	9. Name and Address of Current	11	-			10. Name and Address of New Registered	l Agent	
				81 Name	3		7	
NEEDELMAN, GOLDIE				82 Stree	t Addre	ss (P.O. Box Number is Not Acceptable)		
1401 NE 191ST ST #206								
NO MIAMI			83		•	• -		
				84 City		FI	85 Zip C	ode
agent. I a	m familiar with, and accept the obligation of the control of the second	COLD GOLD (NOTE: Re	gistered	WEE	DE	ration submits this statement for the purpose on's board of directors. I hereby accept the appearance of the purpose of the pu	25/99	
12.	OFFICERS ANI		13.				Change	Addition
TITLE	P	D DELETE	1.1 TI		F	a Ea - 46-1 WILLIE	Change	
NAME	LAMKAY, MIRIAM		1.2 N		177	CFADBEN, WILLIE		
STREET ADDRESS	1401 NE 191ST ST #212		•	REET ADDRES			7 -	
CITY-ST-ZIP	N. MIMAI BEACH FL 33179	☐ DELETE		TY-ST-ZIP	1 4 3 1	MIAMI BEACH, FL 33179	Change -	- C Addition
TITLE	D DUTTE	TT DECE IE	2.1 TT		ارتي	INSTON SELMA	- (E) onango	
NAME	SCHLOSBERG, RUTH		2.2 NA		146	OINE 191 ST #210		
STREET ADDRESS	1401 NE 191 ST APT 218		1	REET ADDRES	S ()	MIAMI BEACH FL. 3317	9	. \
CITY-ST-ZIP	N. MIAMI BEACH FL	☐ DELETE	2.4 C	ITY-ST-ZIP	$\top A$	cct SECO	Change	Addition
TITLE	S COLDIE	D Present	3.1 N	_	4-	SOMPSON JITKA		_
NAME	NEEDELMAN, GOLDIE 1401 NE 191 ST APT 206			REET ADDRES	14	JOMPSON JITHA OINE 1915TH201		•
STREET ADDRESS	N MIAMI BEACH FL			ITY-ST-ZIP	"ไ	MYAM BEACH, FL 3347	9	1
CITY-ST-ZIP TITLE	Me (Special)	☐ DELETE	4.1 T		+ 7/3	2 -0.4	Change	Addition
NAME	FORTUNATO, JOSE	_	4, 2 N	AME	ZA	FFARO, JOSEPH FOR NE 191 ST #105		. 1
STREET ADDRESS	ME 4040T OT 2400		1	REET ADDRES	s 1.4	OF NE 191 ST #105		1
CITY-ST-ZIP	N. MIAMI BEACH FL 33179		1	TY-ST-ZIP	\w'.	MYAMI BEACH, FL 33	リフタ	/
TITLE	D	DELETE	5.1 TF		<i>. U</i>	7	☐ Change	Addition
NAME	WOLFF, RUTH		5.2 N	AME	P	RIETO, LIA		
STREET ADDRESS	ALCA NE AGA OTDEET ADT GAO	3	5.3 S	TREET ADDRES	s { 4	RIETO, LIA 401 NE 191 ST *117		
CITY-ST-ZIP	NO. MIAMI BEACH FL 33179		5.4 CI	TY-ST-ZIP	N.	MIGNI BEACH FL 331	79	
TITLE	T	DELETÉ	6.1 TI	RE	1.		Change	☐ Addition
NAME	MEWORM, BELLA		6.2 N	ME				
STREET ADDRESS	A 444 ME 404 ATREET ART 400	5	6.3 S	TREET ADORES	is			j
CITY-ST-ZIP	N MIAMI BEACH FL 33179		6.4 CI	TY-ST-ZIP		. •		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/99 305.940.369
Date 305.940.369

CR2E037 (11/98)